

Reprinted February 21, 2006

ENGROSSED HOUSE BILL No. 1106

DIGEST OF HB 1106 (Updated February 20, 2006 5:58 pm - DI 104)

Citations Affected: IC 16-18; IC 16-31; IC 34-30.

Synopsis: Automatic external defibrillators. Allows certain persons who provides emergency medical services to use an automated external defibrillator without requiring a certificate. Removes: (1) the use of an automatic or semiautomatic defibrillator from the definition of basic life support; and (2) the requirement that a person or entity that acquires a defibrillator ensure that the users have completed certain courses and have enlisted a physician for medical direction.

Effective: July 1, 2006.

Crouch, Brown T, Brown C, Porter

(SENATE SPONSORS — BECKER, BREAUX, DILLON)

January 5, 2006, read first time and referred to Committee on Public Health.

January 10, 2006, read this time and fereited to Committee of January 10, 2006, reported — Do Pass.

January 17, 2006, read second time, ordered engrossed.

January 18, 2006, engrossed.

January 19, 2006, read third time, passed. Yeas 96, nays 0. SENATE ACTION

January 26, 2006, read first time and referred to Committee on Health and Provider

February 16, 2006, reported favorably — Do Pass. February 20, 2006, read second time, amended, ordered engrossed.









Second Regular Session 114th General Assembly (2006)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type:

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2005 Regular Session of the General Assembly.

ENGROSSED HOUSE BILL No. 1106

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

1	SECTION 1. IC 16-18-2-33.5 IS AMENDED TO READ AS
2	FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 33.5. (a) "Basic life
3	support", for purposes of IC 16-31, means the following:
4	(1) Assessment of emergency patients.
5	(2) Administration of oxygen.
6	(3) Use of mechanical breathing devices.
7	(4) Application of anti-shock trousers.
8	(5) Performance of cardiopulmonary resuscitation.
9	(6) Application of dressings and bandage materials.
10	(7) Application of splinting and immobilization devices.
11	(8) Use of lifting and moving devices to ensure safe transport.
12	(9) Use of an automatic or a semiautomatic defibrillator if the
13	defibrillator is used in accordance with training procedures
14	established by the Indiana emergency medical services
15	commission.
16	(10) (9) Administration by an emergency medical technician or

emergency medical technician-basic advanced of epinephrine



17

C





y

1	through an auto-injector.	
2	(11) (10) For an emergency medical technician-basic advanced,	
3	the following:	
4	(A) Electrocardiogram interpretation.	
5	(B) Manual external defibrillation.	
6	(C) Intravenous fluid therapy.	
7	(12) (11) Other procedures authorized by the Indiana emergency	
8	medical services commission, including procedures contained in	
9	the revised national emergency medical technician basic training	
10	curriculum guide.	
11	(b) Except as provided by:	
12	(1) subsection (a)(10) (a)(9) and the training and certification	
13	standards established under IC 16-31-2-9(4); IC 16-31-2-9(3);	
14	(2) subsection $\frac{(a)(11)(C)}{(a)}$; (a)(10)(C); and	
15	(3) the training standards established under IC 16-31-2-9(5);	
16	IC 16-31-2-9(4);	
17	the term does not include invasive medical care techniques or advanced	
18	life support.	
19	SECTION 2. IC 16-31-2-9 IS AMENDED TO READ AS	
20	FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 9. The commission	
21	shall establish the following:	
22	(1) Standards for persons who provide emergency medical	
23	services and who are not licensed or regulated under IC 16-31-3.	
24	(2) Training and certification standards for the use of automatic	
25	and semiautomatic defibrillators by first responders.	
26	(3) (2) Training standards for the administration of antidotes,	,
27	vaccines, and antibiotics to prepare for or respond to a terrorist or	
28	military attack.	
29	(4) (3) Training and certification standards for the administration	
30	of epinephrine through an auto-injector by:	
31	(A) an emergency medical technician; or	
32	(B) an emergency medical technician-basic advanced.	
33	(5) (4) Training standards to permit the use of antidote kits	
34	containing atropine and pralidoxime chloride for the treatment of	
35	exposure to nerve agents by an emergency medical	
36	technician-basic advanced, an emergency medical technician, or	
37	a first responder.	
38	SECTION 3. IC 16-31-3-1 IS AMENDED TO READ AS	
39	FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 1. (a) Except as	
40	provided in subsection (b), a person other than:	
41	(1) a licensed physician;	
42	(2) a registered nurse or an individual acting under the	



1	supervision of a licensed physician; or	
2	(3) a person providing health care in a hospital or an ambulatory	
3	outpatient surgical center licensed under IC 16-21;	
4	may not furnish, operate, conduct, maintain, advertise, or otherwise be	
5	engaged in providing emergency medical services, except for the use	
6	of an automated external defibrillator, as a part of the regular course	
7	of doing business, either paid or voluntary, unless that person holds a	
8	valid certificate issued by the commission.	
9	(b) A:	_
10	(1) licensed physician;	4
11	(2) registered nurse or an individual acting under the supervision	
12	of a licensed physician; or	
13	(3) person providing health care in a hospital or an ambulatory	
14	outpatient surgical center licensed under IC 16-21;	
15	who operates a business	
16	(A) of transporting emergency patients by ambulance or	4
17	(B) using a nontransporting emergency medical services	
18	vehicle	
19	must hold a valid certificate issued by the commission under this	
20	article.	
21	SECTION 4. IC 16-31-6.5-4 IS AMENDED TO READ AS	
22	FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 4. A person or entity	
23	acquiring a defibrillator shall do the following:	
24	(1) Ensure that expected defibrillator users successfully complete	
25	an American Heart Association automated external defibrillator	
26	course or the equivalent and an American Heart Association	_
27	cardiopulmonary resuscitation course or the equivalent, taught by	T T
28	a national or state approved instructor. The user of a defibrillator	
29	shall possess demonstrated proficiency in defibrillation and	
30	cardiopulmonary resuscitation.	
31	(2) ensure that the defibrillator is maintained and tested according	
32	to the manufacturer's operational guidelines.	
33	(3) Enlist medical direction by a licensed physician in the use of	
34	the defibrillator and cardiopulmonary resuscitation.	
35	SECTION 5. IC 34-30-12-1 IS AMENDED TO READ AS	
36	FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 1. (a) This section does	
37	not apply to services rendered by a health care provider (as defined in	
38	IC 34-18-2-14 or IC 27-12-2-14 before its repeal) to a patient in a	
39	health care facility (as defined in IC 27-8-10-1).	
40	(b) Except as provided in subsection (c), a person who comes upon	
41	the scene of an emergency or accident or is summoned to the scene of	
42	an emergency or accident and, in good faith, gratuitously renders	



1	emergency care at the scene of the emergency or accident is immune	
2	from civil liability for any personal injury that results from:	
3	(1) any act or omission by the person in rendering the emergency	
4	care; or	
5	(2) any act or failure to act to provide or arrange for further	
6	medical treatment or care for the injured person;	
7	except for acts or omissions amounting to gross negligence or willful	
8	or wanton misconduct.	
9	(c) This subsection applies to a person to whom IC 16-31-6.5	
10	applies. A person who gratuitously renders emergency care involving	
11	the use of an automatic external defibrillator is immune from liability	
12	for any act or omission not amounting to gross negligence or willful or	
13	wanton misconduct if the person fulfills the requirements set forth in	
14	IC 16-31-6.5.	
15	(d) This subsection applies to an individual, business, or	_
16	organization to which IC 16-31-6.5 applies. An individual, business, or	
17	organization that allows a person who is an expected user to use an	
18	automatic external defibrillator of the individual, business, or	
19	organization to in good faith gratuitously render emergency care is	
20	immune from civil liability for any damages resulting from an act or	
21	omission not amounting to gross negligence or willful or wanton	
22	misconduct by the user or for acquiring or providing the automatic	
23	external defibrillator to the user for the purpose of rendering the	
24	emergency care if the individual, business, or organization and the user	_
25	fulfill the requirements set forth in IC 16-31-6.5.	
26	(e) The A licensed physician who gives medical direction in the use	
27	of a defibrillator under IC 16-31-6.5-4 or a national or state approved	
28	defibrillator instructor of a person who gratuitously renders emergency	v
29	care involving the use of an automatic external defibrillator is immune	
30	from civil liability for any act or omission of the licensed physician or	
31	instructor if	
32	(1) the act or omission of the licensed physician or instructor:	
33	(A) (1) involves the training for or use of an automatic external	
34	defibrillator; and	
35	(B) (2) does not amount to gross negligence or willful or wanton	
36	misconduct. and	
37	(2) the licensed physician or instructor fulfills the requirements of	
38	IC 16-31-6.5.	



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1106, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill do pass.

BROWN T, Chair

Committee Vote: yeas 11, nays 0.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1106, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill DO PASS.

(Reference is made to House Bill 1106 as printed January 11, 2006.)

MILLER, Chairperson

Committee Vote: Yeas 10, Nays 0.

SENATE MOTION

Madam President: I move that Engrossed House Bill 1106 be amended to read as follows:

Page 1, between the enacting clause and line 1, begin a new paragraph and insert:

"SECTION 1. IC 16-18-2-33.5 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 33.5. (a) "Basic life support", for purposes of IC 16-31, means the following:

- (1) Assessment of emergency patients.
- (2) Administration of oxygen.
- (3) Use of mechanical breathing devices.
- (4) Application of anti-shock trousers.
- (5) Performance of cardiopulmonary resuscitation.
- (6) Application of dressings and bandage materials.
- (7) Application of splinting and immobilization devices.
- (8) Use of lifting and moving devices to ensure safe transport.
- (9) Use of an automatic or a semiautomatic defibrillator if the



U







defibrillator is used in accordance with training procedures established by the Indiana emergency medical services commission.

- (10) (9) Administration by an emergency medical technician or emergency medical technician-basic advanced of epinephrine through an auto-injector.
- (11) (10) For an emergency medical technician-basic advanced, the following:
 - (A) Electrocardiogram interpretation.
 - (B) Manual external defibrillation.
 - (C) Intravenous fluid therapy.
- (12) (11) Other procedures authorized by the Indiana emergency medical services commission, including procedures contained in the revised national emergency medical technician basic training curriculum guide.
- (b) Except as provided by:
 - (1) subsection (a)(10) (a)(9) and the training and certification standards established under IC 16-31-2-9(4); IC 16-31-2-9(3);
 - (2) subsection $\frac{(a)(11)(C)}{(a)}$; (a)(10)(C); and
 - (3) the training standards established under $\frac{1}{1000}$ 16-31-2-9(5); IC 16-31-2-9(4);

the term does not include invasive medical care techniques or advanced life support.

SECTION 2. IC 16-31-2-9 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 9. The commission shall establish the following:

- (1) Standards for persons who provide emergency medical services and who are not licensed or regulated under IC 16-31-3.
- (2) Training and certification standards for the use of automatic and semiautomatic defibrillators by first responders.
- (3) (2) Training standards for the administration of antidotes, vaccines, and antibiotics to prepare for or respond to a terrorist or military attack.
- (4) (3) Training and certification standards for the administration of epinephrine through an auto-injector by:
 - (A) an emergency medical technician; or
 - (B) an emergency medical technician-basic advanced.
- (5) (4) Training standards to permit the use of antidote kits containing atropine and pralidoxime chloride for the treatment of exposure to nerve agents by an emergency medical technician-basic advanced, an emergency medical technician, or a first responder.

EH 1106—LS 6743/DI 77+











SECTION 3. IC 16-31-3-1 IS AMENDED TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2006]: Sec. 1. (a) Except as provided in subsection (b), a person other than:

- (1) a licensed physician;
- (2) a registered nurse or an individual acting under the supervision of a licensed physician; or
- (3) a person providing health care in a hospital or an ambulatory outpatient surgical center licensed under IC 16-21;

may not furnish, operate, conduct, maintain, advertise, or otherwise be engaged in providing emergency medical services, **except for the use of an automated external defibrillator**, as a part of the regular course of doing business, either paid or voluntary, unless that person holds a valid certificate issued by the commission.



- (1) licensed physician;
- (2) registered nurse or an individual acting under the supervision of a licensed physician; or
- (3) person providing health care in a hospital or an ambulatory outpatient surgical center licensed under IC 16-21;

who operates a business

- (A) of transporting emergency patients by ambulance or
- (B) using a nontransporting emergency medical services vehicle

must hold a valid certificate issued by the commission under this article.".

Renumber all SECTIONS consecutively.

(Reference is to EH 1106 as printed February 17, 2006.)

DILLON

C







